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CONFIRMATION NO. 2207

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|--|---|----------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/795,978   | <b>FILING OR 371(c) DATE</b><br>03/10/2004<br><b>RULE</b>   | <b>CLASS</b><br>029              | <b>GROUP ART UNIT</b><br>3729   | <b>ATTORNEY DOCKET NO.</b><br>YMOR:172A |
| <b>APPLICANTS</b><br>Ken Takano, Kadoma-shi, JAPAN;<br>Muneyoshi Fujiwara, Katano-shi, JAPAN;<br>Seiichi Mogi, Utsunomiya-shi, JAPAN;<br>Kurayasu Hamasaki, Katano-shi, JAPAN;   |   |                                  |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a DIV of 09/654,043 09/01/2000 PAT 6,729,018  |   |                                  |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 11-249411 09/03/1999   |   |                                  |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 05/26/2004</b>   |   |                                  |   |   |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <input checked="" type="checkbox"/> Allowance<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>13   | <b>TOTAL CLAIMS</b><br>15               |
|  |   |                                  |   | <b>INDEPENDENT CLAIMS</b><br>6          |
| <b>ADDRESS</b><br>27890  |   |                                  |   |   |
| <b>TITLE</b><br>Method and apparatus for mounting components   |   |                                  |   |   |
| <b>FILING FEE RECEIVED</b><br>1028   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |